

SENDER WILL CHECK CLASSIFICATION TOP AND BOTTOM	
OFFICIAL ROUTING SLIP	
TO	NAME AND ADDRESS
1	DC/SS/OSA
2	
3	
4	
5	
6	
ACTION	DIRECT REPLY
APPROVAL	DISPATCH
COMMENT	FILE
CONCURRENCE	INFORMATION
PREPARE REPLY	RECOMMENDATION
RETURN	SIGNATURE
Remarks:	
Per your Request	
25X9A5 FOLD HERE TO RETURN TO SENDER	
PHONE NO.	DATE
CONFIDENTIAL	SECRET